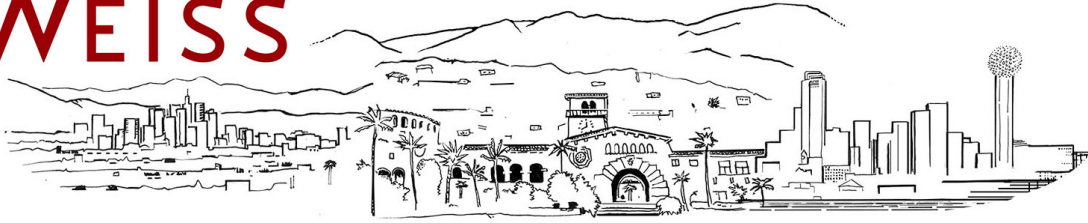


# WEISS



**April 30, 2021**

## **A Negotiation Tip: What's His or Her Own Motivation?**

Here's a great tool for your next negotiation with an entity, say with a hospital or even a healthcare system. Or with any business, for that matter.

It's motivation. Motivation in the context of negotiation. No, not your motivation, but figuring out the other side's motivation. But with a different twist, of course.

When you negotiate with an entity on the other side of a deal, of course you have to be concerned about, and do serious investigation into what that entity's motivations, interests, and payoffs might be.

But also consider this: Because the other side is an entity, it's always going to be represented in the negotiation by people. Let's take some negotiation with a hospital as an example. The hospital will be represented by some executive charged with the outcome. Let's say that it's the CEO.

Think deeply about the CEO's motivation in the negotiation, as opposed to the entity's motivation. What is it?

For example, consider questions like the following: How does the CEO get paid? How does the CEO get evaluated for a promotion? When do evaluations occur? What other pressures is the CEO under?

Do you really understand those factors and what they can mean to you?

Over the course of hundreds of deals, I've seen many in which the hospital's representative, the CEO in our example, took a position or agreed to a position opposed to the hospital's best interest. You wonder why only for so long – then you realize that the CEO's motivation wasn't exactly the same as the hospital's. For example, she was going to be judged on whether the deal closed, and therefore, a closed deal was better than the best deal, the best deal that would have taken longer to achieve.

Although you must, of course, research and evaluate what the business entity on the other side of the deal seeks in terms of success, it might be even more valuable to understand what success means for the executive representing it. In many cases, it's entirely possible to deliver a complete win to the individual sitting across the table from you while delivering a complete win to your own organization in terms of the terms of the contract.

I'm not a big believer in the rote concept of "win-win" negotiation because it often results in you leaving too much on the table. But I'm all in favor of helping the other side's representative "win" while advancing our business interests in the deal.



### **How to Deploy the Secret Sauce of Opportunistic Strategy – Webinar On Demand**

They say that COVID-19 has changed the world, creating the "new normal." Many of your colleagues and many hospital administrators are running scared.

Others, leaders like you, know that *crisis means opportunity*.

Let me provide you with the strategic tools and insights that you need in order to seize opportunities, whether they're in the context of your current business relationships, the expansion of your business activities, or the creation of new ventures.

You will learn:

- Defense as a defective default: It's necessary, but not sufficient.
- Exploiting weakness: Drop the guilt and identify opportunity.
- Flat line negotiation is fatal: Understand its myths and limitations.
- Negotiation reality: Learn to identify and deploy on multiple planes to affect the outcome.
- Maneuver: Harness the power of maneuver, both in overall strategy and in specific negotiation strategy.

Others see a crisis and freeze in fear. Learn how to see the opportunities and obtain the tools to increase your odds of obtaining them.

The price to attend is \$479. The cost of not attending is astronomical.

**Get Access Now!**



## Newsflash: Business Life In the Time of Coronavirus – The Way Out

The coronavirus crisis, especially as it has become politicized, raises a number of business issues and, quite frankly, business opportunities in regard to future disruptive events.

Check out our [mini-series](#), with actionable business lessons for medical group leaders.

Sooner or later this crisis will end. You can't allow yourself to be too busy, too occupied, too concerned with current events, to devote time and effort to strategizing for your future.

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## Wisdom. Applied. 149 – Surgeon Gets Just Deserts For Healthcare Fraud

What is your favorite dessert, something that goes well with barbecue? Whether it's pie or vanilla ice cream (or both!), it's probably not 10 years in federal prison.

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## All Things Personal

In a departure from the usual theme of frustration, this month's column turns to inspiration.

One of the common faults that I rail against, that of "best practices", isn't simply a healthcare phenomenon, it's a business phenomenon and even an operational phenomenon well outside the scope of business enterprise.

The problems are multi-fold.

They include the fact that the entire notion of a "best practice" constitutes a glass ceiling preventing, psychologically at least, innovation and improvement: "Don't blame me for not improving, I'm engaging in recognized 'best practices'."

"Best practices" are generally specific to a domain. For example, there's a best practice in some facet of patient care or some element of billing and collection, but they rarely include data from wildly different life domains, such as well, the circus.

Which brings me to my point.

A couple of weeks ago, on a trip to Florida, I had a chance to take a time out to see the Ringling Circus Museum in Sarasota. I was amazed to learn that day after day for the many months-long tour, the circus train, with its well over 1,000 performers and crew, tents, wagons, animals, costumes, mobile kitchens, and other paraphernalia, would stop early each day, set up the entire circus operation, feed the employees thousands of meals, and, at the end of the day, break down, load up, and move on to the next town.

The process required a fantastic amount of planning and organization, from an advance operation on a separate train, to ordering food for performers, crew, and animals to be delivered just-in-time to each location, and so on.

And here's the real takeaway. Not only did other circuses study the operation, but the U.S. Army did as well. How could such a large organization manage its logistics? Talk about a different domain, clowns to cannons, tigers to tanks, big tops to big ops.

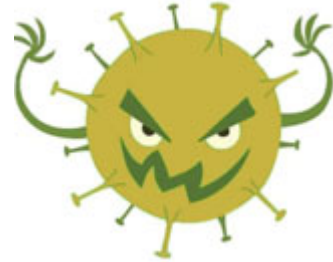
You may well work within a single domain, but don't ignore others to borrow, or even steal, their ideas and processes.

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What tailored content would you most like to see during this time? How can we focus on solutions to your most pressing strategic concerns?

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## Podcast Compilation Greatest Hits - Strategy Edition 1.0

We've curated our most popular podcasts on strategy into our first compilation album.

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Listen [here](#).

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- [The Other Final Four: Hospital Executives Sentenced to Prison](#)
- [L'Air du Temps](#)
- [IBM Might Be Kicking Watson Health to the Curb: The Danger in Big Data](#)
- [Solving the Physician Retirement Crisis](#)

## Published Articles

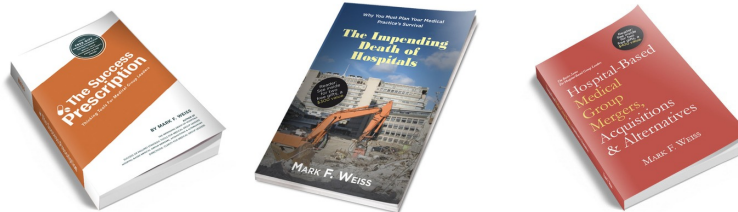
- [You Have Enough Problems. Why Buy Compliance Risk?](#), Summer 2020 Issue of [MiraMed Focus](#)
- [Who Really Owns Your Anesthesia Group?](#), Summer 2020, [Communique](#)
- [The Practical Essentials of the False Claims Act](#), March 2020, on [AnesthesiologyNews.com](#) and in the May 2020 issue of [Gastroenterology & Endoscopy News](#)

## Books and Publications



We all hear, and most of us say, that the pace of change in healthcare is quickening. That means that the pace of required decision-making is increasing, too. Unless, that is, you want to take the “default” route. That’s the one in which you let someone else make the decisions that impact you; you’re just along for the ride. Of course, playing a bit part in scripting your own future isn’t the smart route to stardom. But despite your own best intentions, perhaps it’s your medical group’s governance structure that’s holding you back. In fact, it’s very likely that the problem is systemic. The Medical Group Governance Matrix introduces a simple four-quadrant diagnostic tool to help you find out. It then shows you how to use that tool to build your better, more profitable future. Get your free copy [here](#).

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**Whenever you're ready, here are 4 ways I can help you and your business:**

- 1. Download a copy of The Success Prescription.** My book, The Success Prescription provides you with a framework for thinking about your success. Download a copy of The Success Prescription [here](#).
- 2. Be a guest on “Wisdom. Applied. Podcast.”** Although most of my podcasts involve me addressing an important point for your success, I’m always looking for guests who’d like to be interviewed about their personal and professional achievements and the lessons learned. [Email me](#) if you’re interested in participating.
- 3. Book me to speak to your group or organization.** I’ve spoken at dozens of medical group, healthcare organization, university-sponsored, and private events on many topics such as The Impending Death of Hospitals, the strategic use of OIG Advisory Opinions, medical group governance, and succeeding at negotiations. For more information about a custom presentation for you, [drop us a line](#).
- 4. If You’re Not Yet a Client, Engage Me to Represent You.** If you’re interested in increasing your profit and managing your risk of loss, [email me](#) to connect directly.